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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* CJ

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## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	<u>Clyde H. Jones</u> Examiner's Signature	CJ Initials	9	16	3

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## TITLE

Program reception apparatus

- All Fees
- 1.16 Fees ( Filing )
- 1.17 Fees ( Processing Ext. of

FILING FEE FEES: Authority has been given in Paper

RECEIVED 740	No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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